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APPLICANTS									
Jason Nev	ins, C	ommack, NY;							
** CONTINUING	DATA	<i>\</i> ************************************	*						
** FOREIGN APF	PLICA	TIONS ************	***						
IF REQUIRED, F ** 06/01/2004	OREI	GN FILING LICENSE	GRANTE	ED ** SMALL E	NTITY	**			
35 USC 119 (a-d) conditions				STATE OR	SHEETS		тоти	٩L	INDEPENDENT
Met Verified and Acknowledged Examiner's Signature Initials				COUNTRY NY		AWING CLAII		MS	CLAIMS 1
ADDRESS MYRON AMER, I Suite 310 114 Old Country Mineola , NY 11501									
TITLE Organizer for use	in the	e charging of electricall	y operat	ed consumer p	product	s			
	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:					All Fees			
FILING FEE						1.16 Fees (Filing) 1.17 Fees (Processing Ext. of			
					NT	time)			
385						1.18 Fees (Issue) Other			